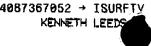


| se type a plus eign (+) inside | | | | Ough 8/30/00 | *TO/68/01 (12-97) 1. OMB 0551-0032 T OF COMMERCE | | |
|---|---|--|---|--|---|--|--|
| Under the Paperwork Redu | etion Act of 1998, no parson | are required to reapond | to a collection (| at jutorumation | Philipp is possessing | | |
| DEGLADATION S | Attorney Docket | LANGUAGE | isurfTV11 | | | | |
| DECLARATION F DES | First Named Inv | enter | Yakov Kamen | | | | |
| PATENT AP | GO | MPLETE | KNOWN | | | | |
| (37 CF | R 1.63) | Application Num | ber | | | | |
| Deciaration [| Declaration | Filing Date | | | | | |
| Submitted OR | Submitted after initial | I Group Art Unit | | ······································ | | | |
| with initial Filing | Filing (surcharge (37 CFR 1.18 (a)) required) | Examiner Name | | | | | |
| As a below named Invest | lar, I hereby declare thek | | · · · · · · · · · · · · · · · · · · · | *** | | | |
| | iddrese, and chizenship are n | e etated balaw next to my | name. | | | | |
| | first and sole inventor (if only | | | | | | |
| Method for | the subject metter which is o | gamed and for which a pg Advertises | tentie sought c | n the inventi Line | an entitled: | | |
| Commercial | Breaks | | | | | | |
| the specification of which | (Title | of the invention) | | | | | |
| OR was filed on (MM/D | | | American III | al. as a | | | |
| | | | | SUOTI NUMBE | ar PCT International | | |
| Application Number and understand the contents of the above identified specification, including the claims, as | | | | | | | |
| amended by any amendme | ini specifically referred to abo | MQ. | | | | | |
| I adknowledge the duty to d | llaciose information which is r | hatener to patentability as | defined in 97 C | IPR 1.56. | | | |
| I hereby claim foreign priori certificate, or 365(a) of any Amarica, listed below and he or of any PCT international a | hy benefita under 35 U.S.C. PCT international explication we also identified below, by o population having a filing date | 118(a)-(d) or 385(b) of a willion designated at lea healting the box, any fore before that of the applica | ny foreign eppi nt ane country ign application tion on which p | lication(s) for other than for patent or norty is claim | patent or inventor's the United States of breaking certificate, and. | | |
| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | | nd Copy Attached? | | |
| | | | | | 8 | | |
| | ļ | | | | Ē | | |
| | | | | <u> </u> | | | |
| Additional torsion application to the party of the party | inder 35 U.S.C. 119(e) of any | supplemental priority data United States provisional | anningtion(s) | /02% etteché lefad balow. | d harator | | |
| Application Number | (a) Filing Date | (WIRADDALAA) | | | | | |
| | | numi supp | pere ere list lementst pi | Bional application led on a flority data sheet bached hereic. | | | |
| | | 1_ | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |

Fage 1 of 2]

Burden Hour Statement: This form is satimated to take 0.4 hours to complete. Time will very depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information POSTERS PROPERTY ACCESSED. PEES OR COMPLETED FORMS TO THIS

. In :: i :=



PTO(8B/01 (19-87)

Approved for use through \$700/06. CMS 06s1-0002

Patent and Texternark Office(U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1985, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Please type a plus sign (+) incide this box -

| | | ATION | | | | | | | | | | |
|--|---|---|--|---|--|--|---|---|--|--|--|---|
| hereby claim thi inhed States of Inited States or formation which and the national | benefit America, PCT Intel I is male | under 35 U.S.C. listed below an mational applica rial to paternabili ternational filter | 120 of a d, inscis tion in the ity se de date of t | uny United Status or as the subjet or manner providings in S7 CF this application | les applica of matter ided by the R 1.55 wh | iion(a), of each officet po ion bet | or 385(0) of the cli ungraph (ame avail | of any PCN Nma of this of 35 U.S.C india batwa | Finternation and application of the complete o | onal ap ion is r sknowk ing dat | pileation dealgr tot disclosed in edge the duty to e of the prior a | nating the the prior dischass oppleation |
| U.S | . Paren | rt Appiloatio | n or P | CT Parent | | Pare | nt Filin Wodyy | g Date | 1 | | rt Patent Nu If applicable | HINDE: |
| | | Numbe | | | | | - | | | | | |
| _ Additional L | 1.8. or PC | T international a | pploatio | u Unupers eu | Satud on | suppl | enentsi pi | northy data | o and to | Laurence Laurence | all business in | the Patent |
| s a named inver nd Tradamerk (| ntor, i hai Mice con | rected therewith | · 🗆 🤋 | kustomer Numb SAR | oet [|) to prosecute this application and to transcot all business in Piece Custor Number Ber C. | | | | | ods | |
| | | | (A) F | legistered pred Regist | | HEATE /TO | glatration | margitaer Ne | red belov | | Regist | |
| | Name | | ∤ | Num | bar | _ | | Nan | 10 | | Nut | iber |
| Kenne | th L | e¢dB | | 30,566 | | | | | | | | |
| Additional | nistered | practitioner(s) n | amed on | BURDISMENTAL | Registere | Practi | ioner Into | mation sh | est PTO/ | 38/0PC | attached hare | 9 |
| Direct all correspondence to: Customer Number or Ser Code Label | | | | | ess below | | | | | | | |
| Name | Ken | meth E. | Le | :ds | | | | | | | | |
| Address | P.C | . Box 2 | 819 | | *** | | | | | | | |
| Address | | | | | | | · | | | | | |
| City | Sunnyvale | | | | | | CA | 21P 94087-0819 | | | | |
| Country | បទ | | | Telephor | w 40 | 8-7 | 32-9 | 500 | Fax | 40 | 8-736-7 | 052 |
| ounishable by I | Rna or Lit | statements ma i turther that the optionment, or lasued thereon. | both, un | n of my own i Imeale Wêre n Ider 18 U.S.C. | Mile with | are tru the long that s | e and the world will have will have been been been been been been been be | nt ell stater rat willtul i I loise elat | neme ma else state ements n | de on ments nsy jeo | information are and the like at pardize the va | d belief are o made are lidity of the |
| Name of Sc | le or P | iret invento | n | | | | petition | ines beer | filed to | r thia L | inalgned inve | ntor |
| Given Name (first and middle lif anvi) Fernily Name or Sumana. Kamen | | | | | | | | | | | | |
| inventor's Signature | | Lel | | Kar | ~ | I N | #10A1J | | - ·· * · · · · | | Date | 11/24/ |
| Residence: C | ity | Cuper | ino | State | CA | c | puntry | บร | | | Citizenship | បន |
| Post Office A | ddress | 19334 | Gre | enwood | Dr. | *** | | | | - | | |
| Feet Office A | | | , | | | | | | | | | |
| cny Cupe | rti | 0 | State | CA | וה | , 9 | 5014 | | _ Cou | intry_ | บร | |
| | | n griled ana 88 | | n the 1 st | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |

[Fage 2 of 2]

| rom | 4087367052 → | ISURFTY |
|-----|--------------|---------|
| | KENNETH | LEET |
| | | |

| DECLARATION | | | | ADDITIONAL INVENTOR(8) Supplemental Sheet Prot of | | | | | |
|--------------------------|--------------------------------|----------|-------------|--|------------------|---|----------------|--|--|
| Verme of Addition | al Joint Inventor, if any | | | A petition | on has been file | ed for th | ile unelgned i | ventar | |
| Given Nar | ne (first and middle (if any)) | | | | Family Na | me or s | Burname | | |
| Leon | | | | Shirma | n . | | | · · | |
| inventor's Bignalure | lean s | کے | hor | - | | | Date | 11/24/99 | |
| Residence: City | Radwood City | Atata | CA | Country | us | | Citizenship | US | |
| Post Office Address | 870 Seminole | May | · · · · · · | | | | | | |
| Post Office Address | Redwood City | 1 | Q4 | 1 7 | ton ten | | 1 | | |
| City | Naganoog City | State | GA | ZIP | 94468 | Count | y us | | |
| Name of Addition | nai Joint inventor, If any | <i>"</i> | | A petiti | ion has been fil | ed for t | his unsigned | nventor | |
| Given Ne | me (firet and middle [if eny]) | | | | Family N | ame or | Ŝumame | | |
| | | | | | | | | | |
| inventor's Bigingture | | | | | | | Dyna | | |
| Residence: City | | State | | Country | | | Chisenahi | | |
| Post Office Address | | | | | | | | | |
| | | | | ' , , , , , , , , , , , , , , , , , , , | | | | | |
| Post Office Address City | | State | | ZIP | | Çau | intry | ······································ | |
| Name of Addition | nel Joint Inventor, if en | v: | <u> </u> | | ton has been fi | led for t | his unalgned | inventor | |
| Given Na | me (first and middle (if any)) | | | | Family N | ame or | Sumame | | |
| | , | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| inventor's Bignature | | | | | | | Date | | |
| Residence: City | | State | | Count | y | | Oltizenshi | p | |
| Poet Office Address | | | | | | | | | |
| | | | | | | | | | |
| Post Office Address | | | | | | | | | |

comments continued to the rorm of estimates to take u.e. nows to complete. Time will vary depending upon the fideds of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20221. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

P 396 4 2

ijΠ **:**: = ÷

Approved for use through gargo/2000. One USo-1A-201

Petent and Tradsmark Office U.S. DEPARTMENT OF COMMERCE

Under the Pepervick Reduction Act of 1995, no persons are required to respond to a obsection of information unless I displays a visit CMS control number.

| Statement Claiming Small Entity Status (37 CFR 1.9(1) & 1.27(c))Bmall Business Concern | Docket Number (Optional) 180717V1 |
|---|---|
| Applicant, Patentee, or Identifier: Yakov Kamen and Leon Shirman | |
| Fledorissued Herewith Title: Method for Using Banner Advertisements Duri Breaks | ng Commercial |
| the owner of the small business concern identified below: an official of the small business concern empowered to act on behalf of the concern | n Identified below: |
| NAMEOFSMALL BUSINESS CUNCERN LEGIFTY | |
| ADDRESSOFSMALL BUSINESS CONCERN 1975 El Camino Real V Mountain View, CA 94040 | lest, Suite 307 |
| I hereby state that the above identified small business concern qualifies as a small business concern qualifies as a small business concern that the United States Petant and Trader to size alandards for a small business concern may be directed to: "Small Business Adminit 409 Third Street, SW, Washington, DC 20419. | nark Office. Questions related |
| I hereby state that rights under contract or law have been conveyed to end remain will identified above with regard to the invention described in: | th the small business concern |
| the application filed herewith with tille as listed above. the application identified above. the patent identified above. | |
| organization follow that are the invanion that the inventor, who would not qualify as a 37 CFR 1.8(a) if that person made the inventor, or by any concern which would not qualify under 37 CFR 1.8(a) if that person made the inventor, or by any concern which would not qualify under 37 CFR 1.8(d), or a nonprofit organization under 37 CFR 1.8(e). | esch individual, concern, or attalian in son do under as a small business concern |
| Each person, concern, or organization having any rights in the invention is listed bekt 120 no such person, concern, or organization exists. 13 each such person, concern, or organization is listed below. | 747; |
| Separate statements are required from each named person, condam or organization stating thair status as small entities. (37 CFR 1.27) | having rights to the invention |
| I ecknowledge the duty to file, in this application or patent, notification of any change entitiement to small entity status prior to paying, or at the time of paying, the earliest of the fice due after the date on which status as a small entity is no longer appropriate. (37 CFR to due after the date on which status as a small entity is no longer appropriate. | !== ! ** |
| NAME OF PERSON BIGNING YEROY KEMEN | |
| TITLE OF PERSON IF OTHER THAN OWNER EVP Of Engineering an | G GTO |
| ADDRESS OF PERSON SIGNING 19334 Greenwood Dr., Cupert | ino. CA 95014 |
| SIGNATURE John Care DATE | 11/24/99 |
| | |
| | |
| | |

Burden Mour Statement: This form is estimated to take 0.2 hours to complete. Time will very sepanding upon the needs of the infollutual case. Any washington, OC 20231. DO NOT SEND FRES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Additions from Patient and Tradement Office Washington. DO 20231.